## **Entry Blank—Please Type or Print**

Signature

Ms./Artist			
☐ Mr./Artist	LILIAN	TYR	RELL (last name last)
Permanent 74 Address 74	808 St Street	Rt 88	RAVANNA
	) 44266 DE	aytime Tel. ( <b>2</b> 16	296 3216
Zip		area	
Temporary or Studio Address			
		Street	City
	Da	aytime Tel. (	)
Zip		area	
	ently live in one of the county were you born?	counties of the Wes	tern
Collaborator (if any	DONN	la Hor	ST
☐ Museum should ☐ Museum should	d dispose of. d ship to artist at artist'	s expense:	
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## **Entry Blanks**

Detach entire portion along dotted line and submit with slides, but retain tags



☐ Paintings ☐ Graphics ☐ Photography Crafts ☐ Sculpture (specify category) Materials used (media): WOOL . LINEN . SILK. DISASTER BLANKET Title 🗲 WARFAGR ELIGIOUS Insurance Value if NFS Only height x width x depth GRAPHICS AND PHOTOGRAPHY ONLY Additional No. Total No. in Price of Print Price of Unframed For Sale Edition Frame Only DO NOT WRITE IN THIS SECTION NOT ACCEPTED ☐ Paintings ☐ Graphics ☐ Photography ☐ Crafts □ Sculpture (specify category) Materials used (media): Title Price or NFS Insurance Value Size If NFS Only height x width x depth GRAPHICS AND PHOTOGRAPHY ONLY. Total No. in Price of Print Price of Additional No. For Sale Edition Unframed Frame Only DO NOT WRITE REC'D ACCEPTED IN THIS SECTION

NOT ACCEPTED